Insurer Name: American Automobile Insurance Co	npany NAIC Nun	nber <u>21849</u>
	EX	HIBIT A
Form (RF-3)		
SUMMA	ARY SHEET	
Change in Company's premium or rate level pro revision effective	duced by rate July 1, 2007	·
	(2) Annual Premium	(3) Percent
Coverage	/olume (Illinois) * Chan	ge (+ or -) **
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage	\$218,604	-3.4%
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) classes? If so, specify: N/A	or certain	
Brief description of filing. (If filing follows rates of an	advisory to Adopt ISO Loss Cost changes: Fire	e & Allied Referenc
* Adjusted to reflect all prior rate changes ** Change in Company's premium level which will result from application of new rates DIVISION OF INITIAL STATES OF INITIAL STATES.	American Automobile Ins	
DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR APR - 2 2007 SPRINGFIELD, ILLINOIS	Name of Com Helen Jee - Regulate Official - Ti	ory Analyst

Insurer Name: The American Insurance Company		NAIC Number 21857
		EXHIBIT A
Form (RF-3)		_ ,, ,
•	SUMMARY SHEET	
Change in Company's premium or rate I revision effective	evel produced by rate July 1, 2007	·
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+ or -) **
 Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity 		
7. Surety		
8. Boiler and Machinery9. Fire10. Extended Coverage11. Inland Marine	\$2,699,476	-12.7%
12. Homeowners		
13. Commercial Multi-Peril14. Crop Hail15. Other		
Brief description of filling. (If filling follows rat	es of an advisory	
organization, specify organizations):CF-2006-RLA1.	Filing to Adopt ISO Loss Cos	t changes: Fire & Allied Referenc
Adjusted to reflect all prior rate changes Change in Company's premium level where result from application of new rates		
DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR		merican Insurance Company Name of Company
APR - 2 2007	Heler	Jee - Regulatory Analyst Official - Title
SPRINGFIELD. ILLINOIS		Onicia - Tue

Insurer Name: Associated Indemnity Corporation		NAIC Number	21865
		EXHIB	IT A
Form (RF-3)		_	
	SUMMARY SHEET		
Change in Company's premium or rate revision effective	e level produced by rate July 1, 2007	•	
(1)	(2) Annual Premiur		nt
Coverage	Volume (Illinois)	* Change (+	or -) **
Automobile Liability Private Passenger Commercial Automobile Physical Damage			
Private Passenger			
Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety			
8. Boiler and Machinery			
9. Fire	\$381,741	-14.29	%
10. Extended Coverage			
11. Inland Marine			
12. Homeowners	-		
13. Commercial Multi-Peril			-
14. Crop Hail			
15. Other			
Line of Insurance			
Does filing only apply to certain territory (to classes? If so, specify: Brief description of filing. (If filing follows rorganization, specify organizations): CF-2006-RLA1.	N/A ates of an advisory	ss Cost changes: Fire & Allie	ed Referenc
* Adjusted to reflect all prior rate change ** Change in Company's premium level v result from application of new rates			
		Associated Indemnity Corpo	oration
<u> </u>			JI QUOTI
DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR	E	Name of Company Helen Jee - Regulatory Ana Official - Title	ılyst
APR - 2 2007	1	Onicial - Hille	
1 ~ ZUII/	1		

SPRINGFIELD, ILLINOIS

SUMMARY SHEET

(Change in Company's premium or ra	te level produced by rate revision effective	5-15-2007
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	282,922	-15%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	iling only apply to certain territory (to Group I, Basic Group II and Specia	erritories) or certain classes? If so, specify: l Causes Coverages	
This Colo (Basi	is a filing to reduce the current comp nial American Casualty and Surety C	s rates of an advisory organization, specify of any deviations for the Fidelity and Deposit Company by 15%. This applies to the comme al Causes Coverages). The overall impact of	Insurance Company and the ercial property line of business
** C	djusted to reflect all prior rate change hange in Company's premium level very sult from application of new rates.		

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

APR 1 2 2007

SPRINGFIELD, ILLINOIS

Colonial American Casualty and Surety Company

Name of Company

Official - Title

Deborah A. Freeman Product Analyst

H29219D

ILLINOIS DEPARTMENT OF INSURANCE (SUMMARY SHEET

Ch	ange in Company's premium or rate k	evel produced by rate revision effective	August 1, 2007
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
_	Passenger Commercial	-	
2.	Automobile Physical Damage		
^	Private Passenger Commercial		
3.	Liability Other Than Auto	-	
4.	Burglary and Theft		
5.	Glass	(Included in Fire & Extended Coverage)	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	<u> </u>	
9.	Fire	17,920	7.2%
	Extended Coverage Inland Marine	10,345	7.2%
	Homeowners	<u> </u>	
	Commercial Multi-Peril		<u> </u>
	Crop Hail	1,030,667	-2.9%
	Other		
10.	Line of Insurance		
Doe		territories) or certain classes? If so, specify:	NO
	ef description of filing. (If filing follows and on ISO	rates of an advisory organization, specify org	anization):
*Ad	justed to reflect all prior rate changes. nange in Company's premium level w	(Year Earned is 2005) hich will result from application of new rates.	
		FCCH	nsurance Company
			me of Company
		Debra J. Comstoo	ck, Regulatory Filing Specialist
			Official – Title

SPENGFIELD ILLINOIS

SUMMARY SHEET

(Change in Company's premium or rat	e level produced by rate revision e	ffective1200 5 - 15 - 200 7
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
••	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	**************************************	
9.	Fire	1,045,288	-15%
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail	-	
5.	Other		
	iling only apply to certain territory (to		specify:
3asic	Group I, Basic Group II and Special	Causes Coverages	
This Colo: (Basi		any deviations for the Fidelity and ompany by 15%. This applies to the	
• A	ljusted to reflect all prior rate change	s.	
	nange in Company's premium level w		
	sult from application of new rates.		
	DIVISION OF	INSURANCE	
	■ STATE OF (_LINOIS/IDFPH	
	REGI	EIVED	Fidelity and Deposit Company of
	400	. 9 2007	Maryland
	APK .	1 2 2007	Name of Company
	CDDINGEI	ELD, ILLINOIS	
	STAINGFIE	ED, ILLII (OIO	Deborah A. Freeman
	L		Product Analyst
			Official Title

Insurer Name: Fireman's F	und Insurance Company	NAIC Number 21873
F (D5.0)		EXHIBIT A
Form (RF-3)	SUMMARY SHEET	
Change in Company's p revision effective	remium or rate level produced by rate July 1, 2007	э
(1) Coverage	(2) Annual Premium Volume (Illinois) *	
Automobile Liability Private Passenger Commercial		
2. Automobile Physical Da Private Passenger	mage 	
Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass		
6. Fidelity 7. Surety		
Boiler and Machinery Fire	\$782,636	-6.6%
10. Extended Coverage 11. Inland Marine		
12. Homeowners13. Commercial Multi-Peril14. Crop Hail		
15. Other	 	
Line of Insura	nce	
classes? If so, specify: Brief description of filing. (If	filing follows rates of an advisory	s Cost changes: Fire & Allied Reference
 * Adjusted to reflect all pri ** Change in Company's presult from application or 	remium level which will	
I	IVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED	eman's Fund Insurance Company
		Name of Company
	APR - 2 2007	
	-1-	Helen Jee - Regulatory Analyst Official - Title

SPRINGFIELD, ILLINOIS

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate le	evel produced by rate revision effective		7/1/07 N - 9/1/07 R
	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>		(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial			
2.	Automobile Physical Damage			
	Private Passenger Commercial			
3	Liability Other Than Auto			
4	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7	Surety			
8.	Boiler and Machinery			
9	Fire	\$ 338,689	œ	-1.0%
	Extended Coverage		•	
	Inland Marine			
	Homeowners			
	Commercial Multi-Peril Crop Hail			
	Other			
13.	Line of Insurance			
	Life of industrio			
Doe	es filing only apply to certain territory (territories) or certain classes? If so, spe	cify:	No
		rates of an advisory organization, speci % to 20% and introduced discounted size factor		
\$2M	to \$10M in value.			
**C	justed to reflect all prior rate changes hange in Company's premium level w Commercial Property Inforce Premiun	hich will result from application of new r n per Company. <u>GuideOne America Ins</u>	urance Na	me of Company
		Scott Reddig, Chief Actu		r Vice President Official ~ Title
				JIRAGI → 1 (UT

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ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	7/1/07 N + 9/1/07 R
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	Coverage	yoranio (minoso)	
1.	Automobile Liability Private		
	Passenger Commercial		. <u> </u>
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5 .	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$ 1,369,452 @	-3.7%
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
10.	Line of Insurance		
	Ello of modulato		
		erritories) or certain classes? If so, specify	
Incr	eased GuideOne New Bidg. Discount from 109	rates of an advisory organization, specify of the control of the c	organization): m Bidg, Between
\$2M	to \$10M in value.		······
**C	ljusted to reflect all prior rate changes. hange in Company's premium level wt Commercial Property Inforce Premium	nich will result from application of new rate per Company.	9S .
	, ,	GuideOne Elite Insurance	
			Name of Company
		See	tt Fedder
		Scott Reddig, Chief Actuary	/ Sr Vice President
			Official Title

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ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Chi	ange in Company's premium or rate le	evel produced by rate revision effective		7/1/07 N - 9/1/07 R
	(1)	(2) Annual Premium		(3) Percent
	Coverage	Volume (Illinois)*		<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial			
2.	Automobile Physical Damage Private Passenger Commercial		•	
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire	\$ 3,484,608	.0	-3.2%
	Extended Coverage	· · · · · · · · · · · · · · · · · · ·		-
	Inland Marine			
	Homeowners			
	Commercial Multi-Peril			
	Crop Hail			
15.	Other			
	Line of Insurance			
Dos	se filing only annly to cortain territory	territories) or certain classes? If so, spe	cifu:	No
DU	ss ming only apply to certain termory (territories) of certain classes: if so, spe	City.	NO .
Brie	ef description of filing. (If filing follows	rates of an advisory organization, speci	fy orga	nization):
Incre	eased GuideOne New Bidg. Discount from 10	% to 20% and introduced discounted size factor	form Blo	lg. Between
\$2M	to \$10M in value.			
	justed to reflect all prior rate changes.			
	hange in Company's premium level w Commercial Property Inforce Premiun			
		GuldeOne Mutual Insu		
		A	Name	e of Company
		ملکو	coth	Hiddey
	•	Scott Reddig, Chief Actu	ary/Sr\	/ice President
			Of	ficial – Title

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ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate le	vel produced by rate revision effective		7/1/07 N - 9/1/07 R
	(1)	(2) Annual Premium		(3) Percent <u>Change (+ or -)**</u>
	Coverage	<u>Volume (Illinois)*</u>		Charge (+ OL-)
1	Automobile Liability Private			
•	Passenger Commercial			
2.	Automobile Physical Damage			
	Private Passenger Commercial			
3	Liability Other Than Auto			
4.	Burglary and Theft			
5	Glass			
6	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire	\$ 270.532	a	-1.1%
	Extended Coverage		_	
11				
	Homeowners			
	Commercial Multi-Peril			
	Crop Hail			
	Other			
10.	Line of Insurance			
Doe	es filing only apply to certain territory	territories) or certain classes? If so, spe	cify:	No
		•		
			_	
Brie	ef description of filing. (If filing follows	rates of an advisory organization, speci	fy org	janization):
		% to 20% and introduced discounted size factor	torm I	Bidg. Between
\$2M	to \$10M in value.			
	justed to reflect all prior rate changes			
		hich will result from application of new r	ates	
@ (Commercial Property Inforce Premiur			_
		GuideOne Specialty M		
			2	me of Company
				A Kiddley
		Scott Reddig, Chief Act.		
			- 1	Official — Title

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DIVISION OF INSURANCE

Form (RF-3)

SUMMARY SHEET

	Change in Company's premium or r	ate level produced by rate revision effective	06/01/07
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft	6,512	0.0
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	49,955	0.0
10.	Extended Coverage		
11.	Inland Marine	133,357	0.0
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		1,000
	Line of Insurance		
Does No	• • • • • • • • • • • • • • • • • • • •	territories) or certain classes? If so, specify:	
Brief	description of filing. (If filing follow	vs rates of an advisory organization, specify o	organization):
		·	

Harco National Insurance Company

Name of Company

Official - Title

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET nzw Change in Company's premium or rate level produced by rate revision effective (1)(2) **Annual Premium** Volume (Illinois)* Change (+ or -)** Coverage 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass 6. Fidelity 7. Surety 8. Boiler and Machinery + 1.00% \$ 134,769 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Kemper Auto and Home proposes to modify the dwelling fire program in Kemper Independence Insurance Company effective 09/15/2006 for new business and 09/15/2007 for renewal business. The primary purpose of this filing is to provide a consistent product across all of our state thereby enabling us to automate this product line. To enable us to provide an automated solution, it is necessary that our product and rating methodology become more consistent across all states. We attempted to minimize any adverse impact to policyholders in Illinois with an overall rate change of 1.00%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Kemper Auto and Home Name of Company Derrick J. Morris - Product Analyst Official - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR RECEIVED JUN 0 1 2006

SPRINGFIELD, ILLINOIS

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ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		August 1, 2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
		<u> </u>
 Automobile Liability Private 		
Passenger Commercial	<u> </u>	
Automobile Physical Damage		
Private Passenger Commercial	<u> </u>	
Liability Other Than Auto	-	
4. Burglary and Theft	<u> </u>	
5. Glass	(Included in Fire & Extended Coverage)	
6. Fidelity	-	
7. Surety 8. Boiler and Machinery	-	
Boiler and Machinery Fire		
10. Extended Coverage	37,008	16.0%
11. Inland Marine	30,287	16.0%
12. Homeowners	-	
13. Commercial Multi-Peril		
14. Crop Hail	641,238	4.9%
15. Other		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	NO
*Adjusted to reflect all prior rate changes	rates of an advisory organization, specify organization, specify organization, specify organization, specify organization of an advisory organization of a specify organization organization.	
	Monroe Guaranty Insurance Company	
	Nam	e of Company
	Debra J. Comstock, Regulatory Filing Specialist	
	Official – Title	
DIVISIO STATE	N OF INSUE NOE OF LINE 4D PR	and the same

APR 3 0 2007

SPRINGFIELD ILLINOIS

DIVISION OF INSUFANCE
STATE OF LEINO (IDEPR

EN 1007

SPRINGFIELD ILLINOIS

Insurer Name: National Surety Corporation		NAIC Number 21881
Form (DE 2)		EXHIBIT A
Form (RF-3)	SUMMARY SHEET	
Change in Company's premium or r	ato lovel produced by rate	
revision effective	July 1, 2007	·
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -) **
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage Private Passenger		
Commercial 3. Liability Other Than Auto 4. Burglary and Theft		
5. Glass6. Fidelity7. Surety		
8. Boiler and Machinery 9. Fire	\$1,137,659	-3.8%
10. Extended Coverage11. Inland Marine		
12. Homeowners 13. Commercial Multi-Peril		
14. Crop Hail 15. Other Line of Insurance		
Does filing only apply to certain territory classes? If so, specify:	(territories) or certain N/A	
Brief description of filing. (If filing follow organization, specify organizations): CF-2006-RLA1.		cost changes: Fire & Allied Referenc
* Adjusted to reflect all prior rate char ** Change in Company's premium lever result from application of new rates	=	
DIVISION OF INSUF STATE OF ILLINOIS/IE	FPR	National Surety Corporation Name of Company
RECEIVE	≣Đ	
APR - 2 200	/ <u>ne</u>	len Jee - Regulatory Analyst Official - Title

SPRINGFIELD, ILLINOIS

Form (RF-3) LLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		August 1, 2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage	· · · · · · · · · · · · · · · · · · ·	
Private Passenger Commerci	al	
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass	(included in Fire & Extended Coverage)	
6. Fidelity	_	
7. Surety	-	
8. Boiler and Machinery	-	
9. Fire	986	1.8%
10. Extended Coverage	1,085	1.8%
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	222,655	-4.5%
14. Crop Hail15. Other		
· · · · · · · · · · · · · · · · · · ·		-
Line of Insurance		
Does filing only apply to certain territor	ry (territories) or certain classes? If so, specify:	NO
The state of the s	y (territorios) or deritain diadaca? it so, specify.	NO
Brief description of filing. (If filing follow Based on ISO	vs rates of an advisory organization, specify orga	anization):
*Adjusted to reflect all prior rate chang **Change in Company's premium leve	es. (Year Earned is 2005) I which will result from application of new rates.	
	National Trus	st Insurance Company
	Nam	e of Company
	Debra J. Comstock	k, Regulatory Filing Specialist
	· -	ficial - Title

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